2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# 702692

Entity Name: SAINT ANDREW'S SCHOOL OF BOCA RATON, INC.

FILED Nov 02, 2016 **Secretary of State** CC3378515421

Current Principal Place of Business:

3900 JOG ROAD

BOCA RATON, FL 33434

Current Mailing Address:

3900 JOG ROAD

BOCA RATON, FL 33434 US

FEI Number: 59-0942383 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

VAN VALKENBURG, KATHY J SAINT ANDREW'S SCHOOL 3900 JOG ROAD BOCA RATON, FL 33434 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

City-State-Zip:

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title **PRESIDENT** Title **CHAIRMAN**

BYER, JAMES SHAPIRO, STEVEN Name Name

Address 1202 SOUTH LAKE DRIVE Address 3017 SPANSIH RIVER ROAD

City-State-Zip: BOCA RATON FL 33432 City-State-Zip: LANTANA FL 33462

Title **SECRETARY** Title **TREASURER** Name BOBER, MICHAEL Name SCOTT, CHASE

Address 271 COCONUT PALM ROAD Address 6039 VIA VENETIA S City-State-Zip: BOCA RATON FL 33432 DELRAY BEACH FL 33484

Title VC Title ASST. TREASURER

Name ZAMIELLO, MICHAEL CORK, PHILIP Name 8760 TWIN LAKES DRIVE Address Address 1185 LANDINGS RUN

City-State-Zip: BOCA RATON FL 33496 City-State-Zip: WEST PALM BEACH FL 33413

Title **ASST TREASURER** Name COMBS, CATHERINE Address 2920 NW 26TH COURT City-State-Zip: BOCA RATON FL 33434

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath: that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617. Florida Statutes, and that my name appears above, or on an attachment with all other like empowered.

11/02/2016 SIGNATURE: PHILIP CORK **ASST TREASURER**